



Visa Account Closing Form

Master Member Name:
Secondary Name(s) on Visa Account (if appl.): <i>Joint-Borrower(s) Auth. User(s)</i>
WCCU Account Number:
Visa Card Number:

As the primary account holder, I hereby wish to close my Visa credit card account attached to the membership listed above. I understand that I, and any joint-borrowers, will be responsible for any balance due, including any interest that has accrued on the balance, as agreed in the original Visa application I (we) signed, and that the card shown above is to be destroyed, as it will no longer be available for use.

X _____

(Signature)

_____ (Date)

Were you happy with our Visa Program? What is the reason for Closure?

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******(Staff Use Only)******

Form Received By: On:	ID Verified via:	Card(s) Surrendered to be Shred? Shred By: On:
<i>Call a Visa Rep to verify balance info for member's benefit, especially if paying off. (If no Visa Rep is available, a letter is sent to confirm the closure and balance.)</i>	Current Balance Due: \$	Auth./Pending Amount (Incl. Interest to Accrue if Paying off): \$ <i>Verifying Visa Rep:</i>
***** <i>Forward to Visa Department for Processing</i> *****		
Form Processed By: On:	Card Closed on FIS By: On:	Block/Reclassification Codes: Block: V-Cancelled Account Reclass:
Once Closed: Set to Purge Removed Plastics Set to No Reissue	<i>If at \$0 Bal.:</i> Related Acct Removed on FIS Suffix Removed from Gold Deleted OTB Card on Gold	Log(s) Updated: Visa Accounts Open Closed Visa Accounts with Balances (if Balance is due)
Letter Sent By: On:	Trackered By: On:	File Pulled & Scanned: By: On:
<i>Once \$0 Balance is confirmed, and file is scanned, the entire scan must be verified and then the file may be shredded.</i>		